



**Surcharge Recipient Organization's
Compliance Procedures for Surcharge Eligibility and Payments**

Appendix B - Schedule of Funds Received and Expended

**Commemorative Coin Program
Schedule of Funds Raised From Private Sources**

Recipient Organization: _____
Commemorative Coin Program _____

Enabling Commemorative Coin Legislation

Act Title _____
Date of Act _____

Program Life **From** _____ **To** _____

Period of Fund R **From** _____ **To** _____

**Dollar Amount Of Funds
Raised From Private Sources** \$ _____

Recipient Organization Representative:

Signature _____ **Date** _____
Title _____

Mint Approval:

Signature _____ **Date** _____
Title _____